## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10787067

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS			50		:		ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	69 min	us 20=	. 49			X\$ 9=		OR	X\$18=	882
INDEPENDENT CLAIMS			5 mi	nus 3 =	* 2			X43=		OR	X86=	172
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT					+145=		OR	+290=	290
* If	the difference	in column 1 is	less than zero, enter "0" in colun			olumn 2	L	TOTAL		OR	TOTAL	2114
	C		MENDED	DED - PART II (Column 2) (Column 3)				SMALL E	ENTITY	OR	OTHER SMALL I	
		(Column 1)	<del></del>	(Colur		(Column 3)	Г					ADDI-
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	CLAIM	ئـــلــا		+145=		OR	+290=	
								TOTAL			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		4	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T ()   4 !! 4	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	NU PRE\		HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##1		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145=									OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		mber Previously Panber Previously Pa			ie lees th	AA 7 AAIA/ 3			propriate bo	x in c	olumn 1.	